NC-TOPPS: A Quality Improvement Tool

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Overview



What is NC-TOPPS?

- → How can NC-TOPPS be a useful tool for quality improvement?
 - **★**Existing system: Reports
 - **★**Expanded system: Dashboard and query system
- → Implications for multiple stakeholders:
 - **→**Consumers and family members, policymakers, providers, LMEs, clinicians



What is NC-TOPPS?

- **★**Key tool in Division's State Plan for Transformation
 - **★**Goal of NC-TOPPS is to IMPROVE, not REPROVE



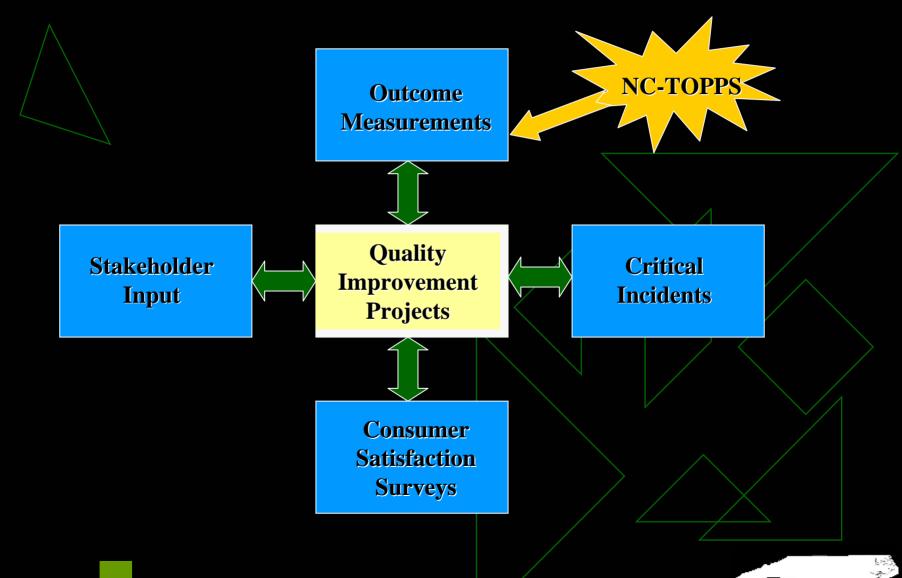




♦Outcomes Management: Use of the data to improve services and attainment of outcomes



NC-TOPPS as part of the quality improvement system



→Existing system

- → Reports can be provided at multiple levels: statewide, LME, \(\rightarrow\) provider specific
- → Reports can also be provided for most specialty populations
- **★**LMEs and providers can analyze their own data
- **→**Expanded system
 - **→**NC-TOPPS data at your fingertips!
 - **→** Dashboard
 - **→**Advanced query system
 - +Clinician query

Existing NC-TOPPS system

Three types of reports are currently available for five populations: Adult Mental Health, Adolescent Mental Health, Child Mental Health, Adult Substance Abuse, Adolescent Substance Abuse

→ Initial Report

→ How many adult African American females in your LME enter treatment with severe mental health problems as compared to another LME?

→ Update Report (3/6/12 months/Episode Completion)

→ How do adolescent substance abuse consumers in your LME compare to the rest of the state after six months?

→ Matched reports

→ How did your LME and providers do in providing services to children and adolescents in their home county during treatment?



How can NC-TOPPS be a useful tool for quality improvement?



- **→**Key questions to ask
 - **→**How do we interpret these data?
 - → Who can help tell us the story behind these numbers?
 - → Who can offer us insights into surprising findings?
 - →What improvements do we need to make based on these findings?
 - +Are consumers needs being met?
 - → How can this information help improve our programs?

Policymakers: Possible Questions Generated from Statewide Information

- →In 2006, did NC increase the percentage of consumers with stable employment? Was there a region that showed greater improvement? How does this relate to employment for the general population in that area?
- → In 2006, did NC reduce the number of child/adolescent truancy, suspension, and/or days absent from school? How does the trend in these numbers compare to all students? Do these data show a particular population in need of more intervention/support in this area?
- → In 2006, did NC increase the grades for child and/or adolescent consumers? Was there any relationship between academic success and decrease of symptoms? Stabilizing housing? Increasing family involvement with treatment?
- → How did homeless children/adolescents' outcomes compare to those in stable housing? Is there a relationship between stable living conditions and positive outcomes? How is the state as a whole doing in improving children's quality of life?



LMEs: Possible Questions Generated from LME Data

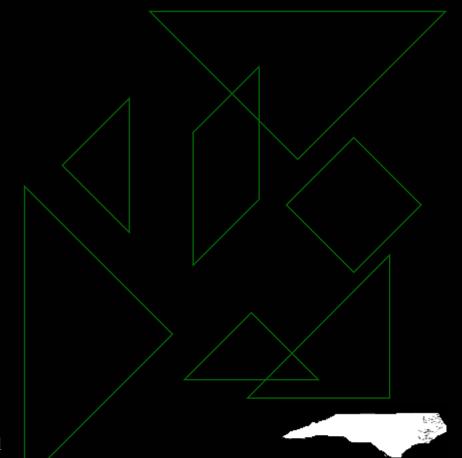
- →In 2006, did your LME increase the percentage of consumers with stable employment? How does this compare to other LMEs? To the state? Are there some providers in your catchment area that show strong improvement in supporting stable employment? What characteristics do these providers have in common?
- → In 2006, did your LME reduce the number of child/adolescent truancy, suspension, days absent from school? How did this compare to other LMEs?
- →In 2006, did your LME increase the grades for child/adolescent consumers? How did this compare to other LMEs? To the state? Are there any relationships between improved school performance and other quality of life measures?

Providers: Possible Questions Generated from Provider Data

- →In 2006, was there an increase in the percentage of consumers with stable employment? What were the characteristics of these populations? Is there any pattern to the improvement?
- →In 2006, did we see a decrease in children and adolescent truancy, suspension, and/or days absent from school? How do these rates compare to the level of interference of symptoms with daily living?
- →In 2006, did the grades for children receiving services improve, decrease, or stay the same? Was there a difference between boys and girls? Different age groups or grade levels? Diagnoses?
- → Were there any significant differences among populations, methods of treatment, or service locations? How did these data compare to the entire LME? To the state?



NC-TOPPS: Expanded Features



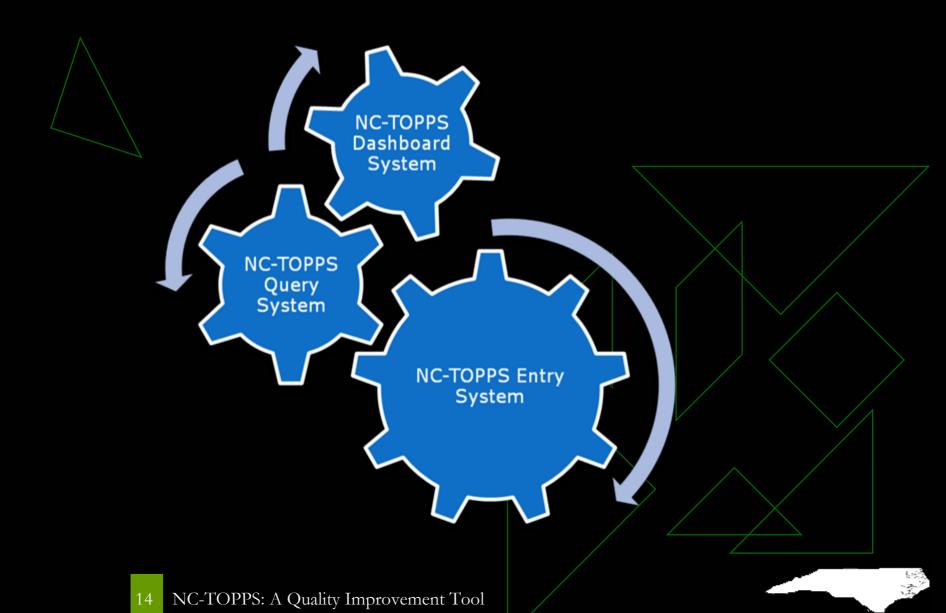


→Improvements to existing system

- ★Enhanced reporting capabilities
- **→**Instant data
- **★**Available 24/7
- **→** Instant feedback and reports
- → Data available at many levels (individual, provider, LME, statewide)
- **→** Timely data

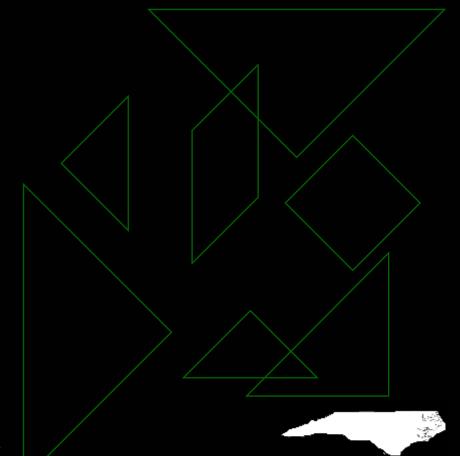


NC-TOPPS Expansion





Dashboard Overview





Data Views

State, LME, Provider, Clinician



Query Input

Population group, Assessment Type, Time Frame, Result Columns, Result Rows, Advanced Filter



Crosstab Query Result

Frequency Number and Percentage



Print/Export Results

Printer Friendly Query Results, Export Query Results to Excel



→ The Dashboard System is a web-based application open to the public (anyone with internet access) which uses visual, at-a-glance displays of data pulled from NC-TOPPS to provide a view of particular outcome measures for all five consumer groups.

→ Some examples of these measures include employment, education, mental health symptoms, substance use

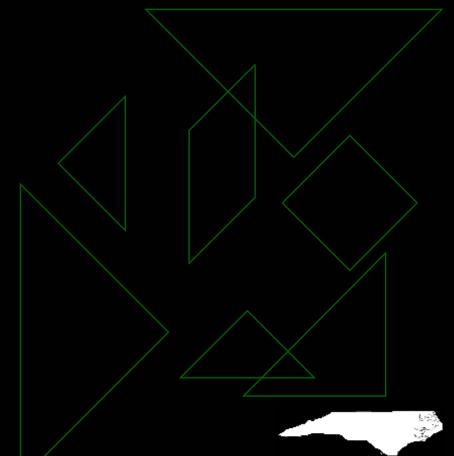
→Let's take a look...





Query System Overview







- NC-TOPPS Query System will be accessible only to NC-TOPPS users. The web-based application will provide users with the capability to run Crosstab Queries for all of the items from the interview tool.
- + The system will also provide useful tools for users.

 These tools will allow users to easily access queries provided by the state, save personalized queries, and help



- +The Crosstab Query allows users to create crosstab queries to analyze aggregated NC-TOPPS data from various data views.
- Depending on user security level, users can drill down from state data to clinician aggregated data.
- +Once queries are executed the user has the option to save, print, or export results to MS Excel for further review.
- +Let's take a look at an early prototype of this system...



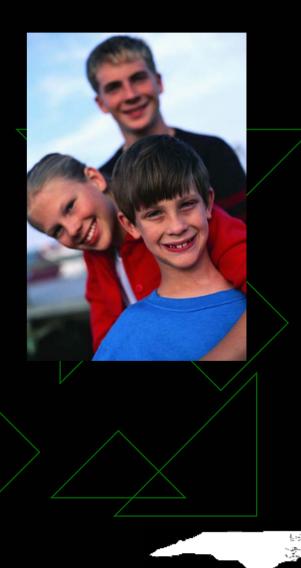
Clinician Query Overview





The Main Question

Is the treatment or service helping to improve the individual's life?



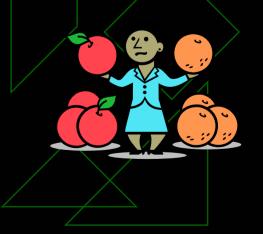
- ★ An online tool located within NC-TOPPS that allows the clinician to obtain a consumer status report that examines
 ∧ the consumer's outcomes while in treatment.
- ★ The Consumer Status Report provides a comparison of up to three time points
 - The initial and the two most recent NC-TOPPS updates are shown in a single printable report.





How Is This Tool Different?

- ♦ Designed specifically for the consumer and his/her clinician.
 - The query uses live data not aggregate data.
- ◆ Examines the consumer's functioning over time.
 - Able to receive a report that examines how the consumer's condition changed **pre** treatment **since** treatment commenced and **during** treatment?
- ◆ The report generated is a consumer report.
 - Consumer-friendly in language and look.





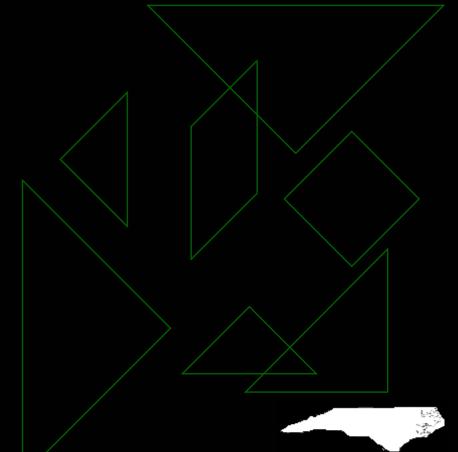
What Is Included In The Consumer Status Report?

- → 23 predetermined measures covering the areas of:
 - ★ Consumer perceptions of symptom severity and health (physical & emotional)
 - → Services important to the consumer
 - → Substance Use
 - → Mental Health
 - **→** Employment
 - + Education
 - + Housing
 - **→** Connectedness
 - **→** Sexual Behavior
 - → Legal Involvement
 - + Services needed





The Clinician Query: Consumer Status Report



How Can the Report Be Used?

By the Consumer

- **→**Evaluate their condition
 - **→** In what areas have I made progress?
 - **→** What areas still require attention?



- + Evaluate their satisfaction with treatment and services provided by the clinician and agency
 - + Have I obtained results with this provider?
 - + Do they have the services I need?



How Can the Report Be Used?

- → By the Clinician
 - → Encourage consumer participation by visually showing their progress



- → Monitor the impact of treatment/services on the consumer's condition.
- → Completion of the person centered plan (PCP)
 - → Able to determine progress in attainment of goals and areas where intervention is still needed.
 - → A presentation describing how to use NC-TOPPS data in completing the PCP is available on the NC-TOPPS website in the link "Training Support Materials"



When will these expansions be available?

+ We expect to have the expanded system available by the end of the year!





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